·			manager on manager on the state of the second state of		(A y table and MacDiffeld by Congress Street Congress Congress		
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known			
FEE TRANSMITTAL				pplication Number	10/612,894		
, , , , , , , , , , , , , , , , , , ,				ling Date	7/7/2003		
For FY 2009				rst Named Inventor	James M. Hagberg et al.		
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name Stephen Thomas Kapushoc			oc
				Art Unit 1634			
TOTAL AMOUNT OF PAYMENT (\$) 555.00			A	Attorney Docket 5458 - 071900			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FE		ARCH FEE				
Application Typ	***************************************	Entity e(\$) Fee(Small En S) Fee (S		mall Entity Fee (\$)	Fees 1	Paid (\$)
Utility		32 540		220	110	rees	(AIG (B)
Design	220 1	10 100	50	140	70	**************************************	-
Plant	220 1	10 330	165	170	85	***************************************	
Reissue	330 1	65 540	270	650	325	***************************************	
Provisional	220 1	10 0	0	0	0	***************************************	
2. EXCESS CLAIM FEES							Small Entity
Fee Description							Fee (\$)
Each claim over 20 (including Reissues) 52							26
Each independent cla				220	110		
Multiple dependent of		outure Claire	IC (#)	NT 10 11 (6)		390	195
Total Claims	$\frac{-20 \text{ or HP}}{27} = \frac{E}{2}$	<u>xtra Claims</u> 0 x	Fee (\$)	Fee Paid (\$)			ependent Claims
HP = highest number	of total claims paid for		<u> </u>			<u>Fee (\$)</u>	Fee Paid (\$)
		xtra Claims	Fee (\$)	Fee Paid (\$)			-
HP = highest number of	6 = of independent claims :	0 x	<u>0</u>	=			
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.							
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets			additional 50 or frac		Fee (\$)	Fee Paid (\$)
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid							
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Petition for Three-Month Extension of Time							
SUBMITTED BY	T		7				
Signature	Man	erce In	del	Registration No. (Attorney/Agent)	55,739	Telephone 4	12-471-8815
Name (Print/Type)	Thomas C. V	Volski		(. momey/rigent)			ıst 6. 2009